#### FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

MAR I 5 2004
18 PECUSEOMLY
President Serial
DATE RECEIVED
1 1

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Private Placement of Limited Partnership Interests of Meritage Multi-Strategy Fund, L.P.	- APECEE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	PROCESOL
Type of Filing:  New Filing	MAR 1 6 200
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	THOMSON
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Meritage Marif-Strategy Fund, L.P.	Miles -
Address of Executive Offices (No. and Street, City, State, Zip Code) Telephone Number (Including	Area Code)
114 West Seventh Street, Suite 1300, Austin, Texas 78701 (512) 637-9700	
Address of Principal Business Operations (No. and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)	
Brief Description of Business Investment Partnership	
Type of Business Organization	
☐ corporation ☑ limited partnership, already formed ☐	other (please specify):
business trust   limited partnership, to be formed	comes (bremes absentit).
Month Year	
Actual or Estimated Date of Incorporation or Organization:  0 5 0 3   Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE	
CN for Canada; FN for other foreign jurisdiction)	
Civital Canada, 11 for Canada Tolongii jamada (Civita)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.	on the earlier of the date it is
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signatures.	I copy or bear typed or printed
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information request changes from the information previously supplied in Paris A and B. Pari E and the Appendix need not be filed with the SEC.	ed in Part C, and any material
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this for must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completely appropriate states in accordance with state law.	exemption, a fee in the proper
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, the appropriate federal notice will not result in a loss of an available state exemption unless such predicated on the filing of a federal notice.	
Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.	SEC 1972 (2-97)



		A. BASIC IDENTIF	ICATION DATA		
2.	Enter the information requested for the following	owing:			
•	Each promoter of the issuer, if the issuer has Each beneficial owner having the power to issuer;	s been organized within the p vote or dispose, or direct the	oast five years; vote or disposition of, 10% o	r more of a class	of equity securities of the
	Each executive officer and director of corporate Each general and managing partner of partners.		general and managing partner	s of partnership is	ssuers; and
Ch	eck Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	l Name (Last name first, if individual) ritage Capital, L.P.				
Bu	siness or Residence Address (Number and Str West Seventh Street, Suite 1300, Austin, Te				
Ch	eck Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
MF	l Name (Last name first, if individual) I Capital, LLC, General Partner of the Gener	al Partner			
	siness or Residence Address (Number and Str West Seventh Street, Suite 1300, Austin, Te				
	eck Box(es) that Apply:	☐ Beneficial Owner	☐Executive Officer	☐ Director	⊠ General and/or     Managing Partner
St.	l Name (Last name first, if individual) James's Park Holding, LLC, General Partner	of the General Partner			
	siness or Residence Address (Number and Str West Seventh Street, Suite 1300, Austin, Te				
Ch	eck Box(es) that Apply:   ☐ Promoter	☐ Beneficial Owner	⊠Executive Officer	① Director	☑General and/or Managing Partner
Me	l Name (Last name first, if individual) redith, Thomas J., Chief Executive Officer of	MFI Capital, LLC			
	siness or Residence Address (Number and Str West Seventh Street, Suite 1300, Austin, Te				
Ch	eck Box(es) that Apply:  Promoter	☐ Beneficial Owner	⊠Executive Officer	☐ Director	⊠General and/or     Managing Partner
	l Name (Last name first, if individual) ith, Alex C., Manager of St. James's Park Ho	lding, LLC			
Bu	siness or Residence Address (Number and Str West Seventh Street, Suite 1300, Austin, Te	ect, City, State, Zip Code)			
Ch	eck Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Ful	Name (Last name first, if individual)				
Bu	siness or Residence Address (Number and Str	eet, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Ful	Name (Last name first, if individual)				
Bus	siness or Residence Address (Number and Str	eet, City, State, Zip Code)			
Che	eck Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	Name (Last name first, if individual)				
Bus	iness or Residence Address (Number and Str	ect, City, State, Zip Code)			

-	(Use blank sheet, or copy and use additional copies of this sheet, as necessary)												
	[A4]	[OK]	[MI] [OK]	[wv]	[MD]	[VK]	[YV] [TV]	[MV] [TU]	[tv] [XT]	[HV] [NT]	[VV]	[ac]	[1,8]
	[MO]	[SM]	[NN]	[IM]	[AM]	[MD]	[ME]	[FY]	[KA]	[K2]	[\I]	[NI]	[11]
	[[]]	[HI]	[AD]	[FL]	[DC]	[DE]	[TD]	[co]	[CA]	[AR]	[ZA]	[AK]	[AL]
estal States	***************************************												States in WI
	Name of Associated Broket or Dealer												Name of As
		<del></del>			(aboD o	iate, Zip	City, S	d Street	пь тэдт	ress (Nu	ibbA əər	19bizə <i>A</i>	Business or
									(laubi	vibai Ii	,isifi əm	Last na	Full Name (
	[धत]	[ww]	[IM]	[VW]		[AV]	[TV]	[תח]	[XT]	[NT]	[as]	[sc]	[13]
	[A¶]	[AO]	[OK]	[HO]	[ND]	[NC]	[AN]	[MN]	[[N]	[HN]	[VV]	[NE]	[TM]
	[OM]	[SM]	[NM]	[IM]	[AM]		[ME]	[FV]	[K]	[K2]	[VI]	[NI]	[11]
Same HA Carre	[01]	(iH)	[AD]	[14]	[DC]	[DE]	[CL]	[00] (52)	[C∀]	r marvi [AR]	[ZA]	[NA]	[AL]
sotet2 ([A 🗌													States in W
									ler	or Dea	ι Βιοκει	ostaisoss	eA to ameV
					Code)	iate, Zin	, City, S	аэтт2 b	простап	ress (Mu	bbA əər	. Keside	Business or
		**************************************											Full Name (
	[ਬਰ]	[wv]	[IM]	[vv]	[AW]	[AV]	[TV]	[TU]	[XT]	[NT]	[as]	[2C]	[[81]
	[44]	[OK]	[OK]	[HO]	[an]	[NC]	[אא]	[MM]	[เท]	[HN]	[\n]	[NE]	[TM]
	[ow]	[SM]	[MM]	[IM]	[AM]	[MD]	[WE]	[FY]	[KA]	[K2]	[AI]	[NI]	[11]
	[1D]	[H]]	[AD]	[FL]	[DC]	[DE]		[co]	[CA]	[AA]	[SA]	[YK]	[AL]
States IIA Charles	·	***********	••••••										States in W (Check "Al
	<u></u>		- 1 <sub>3-11</sub> - 11-11-11-11-11-11-11-11-11-11-11-11-1			4 7,7.1	<u> </u>		, <del></del>				Name of As
					(abo)	liate, Zip	, City, S	lootiS bi	imber ar	лИ) гаэт	bbA sor	. Keside	Business or
									(leubi	vibai Ii	taril om	en teed)	Full Name (
	Enter the information requested for each person who has been or will be paid or given, directly or information or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five for that broker or dealer only.								ooribni Joos 10 olsigor Jog (2)				
X C2 No						зir	រប ១ខ្រែពរៈ	s to qir	ราวถง/0	trioį tir	məq gai	he offer	3. Does t
000,000,2 \$				?leubi	ivibai ya	is mori i	poldacol	od (liw	tadt that	misovni	mumin	m odt zi	2. What i
Yes No	i	gnirello			i bəribər gailfi Ti						sold or	Toussi o	rl Hasth
					NOIT								

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box p and indicate in the columns below the amounts of the securities					
	offered for exchange and already exchanged.  Type of Security		ggreg		An	nount Already
			ering I		_	Sold
	Debt	S			S	
	Equity	S	0		S	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	S	00		S	0
	Partnership Interests	\$5,000	0,000		\$ <u>5,0</u>	00,000
	Other (Specify)	\$	0		_ S	0
	Total	\$5,000	0,000		\$ <u>5,0</u>	00,000
	Answer also in Appendix, Column 3, if filing under ULOE					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."					
		-	Numbe nvesto	-	Do	Aggregate ollar Amount f Purchases
	Accredited Investors		1		\$ <u>5.0</u>	00.000
	Non-accredited Investors		0		\$	0
	Total (for filings under Rule 504 only)		N/A		S	N/A
	Answer also in Appendix, Column 4, if filing under ULOE					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		n	c	D	March and a
	Type of offering	S	l'ype o Securit	У	Do	ollar Amount Sold
	Rule 505		N/A		\$	N/A
	Regulation A		N/A		S	N/A
	Rule 504		N/A		\$	N/A
	Total	********	N/A		S	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secur this offering. Exclude amounts relating solely to organization expenses of the issuer. The informa be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	tion may	<b>/</b>			
	Transfer Agent's Fees	• • • • • • • • • • • • • • • • • • • •			\$	0
	Printing and Engraving Costs	••••••			\$	00
	Legal Fees		•••	×	<b>S</b>	1,000
	Accounting Fees	,			\$	
	Engineering Fees				S	0
	Sales Commissions (specify finder's fees separately)				\$	0
	Other Expenses (identify)				S	0
	Total			X	\$	1,000
					-	

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS	8
	and total expenses furnished in response to	gate offering price given in response to Part C-Question 1 Part C-Question 4.a. This difference is the "adjusted gross			\$4,999,000
5.	each of the purposes shown. If the amoun	gross proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and he total of the payments listed must equal the adjusted gross to Part C-Question 4.b. above.			
			( Di	yments to Officers, rectors, & Affiliates	Payments To Others
	Salaries and fees		\$	0	\$
	Purchase of real estate		S		\$
	Purchase, rental or leasing and instal	lation of machinery and equipment	S		\$
	Construction or leasing of plant buil	dings and facilities	S		\$
	Acquisition of other businesses (incl may be used in exchange for the ass	uding the value of securities involved in this offering that ets or securities of another issuer pursuant to a merger)	S		S
	Repayment of indebtedness		S		\$
	Working capital		<u>s</u>		\$
	Other (specify) (investments)		s	⊠	\$4,999,000
	Column Totals		\$	×	\$4,999,000
	Total Payments Listed (column total	s added)		\$ <u>4,9</u>	99,000
		D. FEDERAL SIGNATURE			
igna	ature constitutes an undertaking by the issuer	d by the undersigned duly authorized person. If this notice is to furnish to the U.S. Securities and Exchange Commission, understood investor pursuant to paragraph (b) (2) of Rule 502.	filed ui ipon w	nder Rule 50 ritten reques	5, the following t of its staff, the
Isst	uer (Print or Type)	Signature X house Head Date			
Me	ritage Multi-Strategy Fund, L.P.	x ale c. Sie March	1,20	04	
Tho	me of Signer (Print or Type) omas J. Meredith	Title of Signer (Print or Type) Chief Executive Officer of MFI Capital, LLC, General Parts General Partner			
Ale	ex C. Smith	Manager of St. James's Park Holding LLC, General Partner Partner	of M	eritage Capit	al, L.P., General
		ATTENTION			
	Intentional misstatements or or	nissions of fact constitute federal criminal violations	. (See	18 U.S.C.	1001).

		E. STATE SIGNATURE								
1.	Is any party described in 17 CFR 230.262 prule?	eresently subject to any of the disqualification provisions of such Yes No								
	See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	e issuer has read this notification and knows t dersigned duly authorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the								
Iss	uer (Print or Type)	Signature X Tomas There Date								
Ме	ritage Multi-Strategy Fund, L.P.	X alec. Set March 11, 2004								
Name of Signer (Print or Type) Thomas J. Meredith		Title of Signer (Print or Type) Chief Executive Officer of MFI Capital, LLC, General Partner of Meritage Capital, L.P., General Partner								
Ale	ex C. Smith	Manager of St. James's Park Holding LLC, General Partner of Meritage Capital, L.P., General Partner								

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

1		2	3			5				
	accredited S (Pa	sell to non- investors in tate urt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL										
AK										
AZ										
AR										
CA										
СО										
CT										
DE	***********							**************************************		
DC										
FL										
GA				V-1						
ні										
ID										
lL										
IN										
IA										
KS										
кү										
LA					!					
ME										
MD										
MA										
MI										
MN										
MS										

#### APPENDIX

]		2	3		4				
	accredited St (Pa	sell to non- investors in tate irt B- m 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре о	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		
МО							·		
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD				***					
TN									
ТX	Yes		Limited Partnership Interests \$5,000,000	1	\$5,000,000	0	\$0	No	
UT									
VT									
VA							(		
WA									
wv									

#### APPENDIX

ı		2	3		5			
	accredited S (Pa	sell to non- i investors in state art B- em 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
WI								
WY								
PR								